

As a below named inventor, I hereby declare that:
My residence, post office address and citizenship are as stated below next to my name; that
I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

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			HENTICATION	METHOD,	AND AUTHE	
described and clai	imed in the specific	cation:				DEVICE
Check one						
*a.	attached heret					
b.	filed on as Application Serial No and					
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	(if applicable) by state that I have	e reviewed and u	nderstand the conte	nts of the abov	e-identified applica	ation, including the
claims, as amende	ed by any amendme	ent referred to abo	ove.			_
I ackn	owledge the duty	to disclose to the	Office all informa	ition known to	me to be material	to patentability as
	7, Code of Federal	_				
			ority benefits of the o this application ar			nd/or United States
• ••				· ·		
Japanese	Patent Application	tion No. 11-244	1519, filed on Au	gust 31, 1999)	
The fo	llowing applicatio	n(s) for patent or	inventor's certificat	e on this inver	ntion were filed in	countries foreign to
			e year prior to this a		(b) before the filing	g date of the above-
named foreign pri	ority application(s) and/or Omited Si	tates provisional app	nication(s).		
I hereb	y appoint the follo	wing as my attor	neys of record with	full power of s	ubstitution and revo	ocation to prosecute
this application ar			nt and Trademark C			
			7,075; William P. B			
			27,562; Thomas J. o. 31,450; Robert A			
	Mario A. Costani	ino, Reg. No. 33,	565; and Caroline D	Dennison, Re	eg. No.34,494.	
ALL CORRESP	ONDENCE IN (CONNECTION	WITH THIS APP	LICATION S	HOULD BE SEN	NT TO OLIFF &
BERRIDGE, P.O.	. BOX 19928, ALF	EXANDRIA, VIR	GINIA 22320, TEL	EPHONE (703	3) 836-6400.	
I hereb	by declare that I ha	ive reviewed and	understand the cont	ents of this De	claration, and that	all statements made
						ved to be true; and
turther that these	statements were n	nade with the kno	wledge that willful	the United St	is and the like so mates. Code and that	nade are punishable t such willful false
statements may je	copardize the valid	ity of the applicati	ion or any patent iss	ued thereon.	ates Code and that	, such willful laise
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of Sole of Phst Inventor.		Given Name	Middle	Initial		/ Name
**Inventor's Signature:		Taw	Wilder	miliai	Tera	· •
**Date of Signatu			/1 / 2	- / (7000 Penn	<u> </u>
Date of Signatu	ne.		4 / 2. Ionth	Day	Year	
Residence:	Nakai-mac		Kanagawa	Day	Japan	
Residence.	City		State of Provi	nce	Countr	
Citizenship:		Japan				,
Post Office Addre	- 66.	c/o Fuji Xerox Co., Ltd., 430, Sakai, Nakai-machi,				
(Insert complete mailing address, including country)		Ashigarakami-gun, Kanagawa, Japan				
and ess, including country)		A LOUIS BULLING AND				
			e specification (incl			Box a. is checked.
**Note to Invento	or: Please sign na	me exactly as it a	ppears above and in	sert the actual	date of signing.	
IF THERE IS MO	RE THAN ONE I	NVENTOR USE	PAGE 2 AND PLA	CE AN "×" I	HERE 🔲	